



Coverage Is Provided In:  
Ohio Security Insurance Company

Policy Number:  
**BLS (17) 54 77 48 20**  
Policy Period:  
**From 05/18/2016 To 05/18/2017**  
12:01 am Standard Time  
at Insured Mailing Location

## Common Policy Declarations

### Named Insured & Mailing Address

VALLEY WEST ELECTRIC LLC  
5112 BRIARCREST DR  
NAMPA, ID 83686

### Agent Mailing Address & Phone No.

(208) 466-4800  
JIM WATERS INSURANCE LLC  
1713 12TH AVE RD  
NAMPA, ID 83686-6104

Named Insured Is: LIMITED LIABILITY COMPANY

Named Insured Business Is: ELECTRICIAN

*In return for the payment of the premium, and subject to all the terms of this policy, we agree with you to provide the insurance as stated in this policy.*

### SUMMARY OF COVERAGE PARTS AND CHARGES

This policy consists of this Common Policy Declarations page, Common Policy Conditions, Coverage Parts (which consist of coverage forms and other applicable forms and endorsements, if any, issued to form a part of them) and any other forms and endorsements issued to be part of this policy.

#### COVERAGE PART

#### CHARGES

Commercial General Liability

\$500.00

*Total Charges for all of the above coverage parts:*  
*Certified Acts of Terrorism Coverage:*

*\$500.00*  
*\$2.00 (Included)*

*Note: This is not a bill*

### IMPORTANT MESSAGES

- This policy is auditable. Please refer to the conditions of the policy for details or contact your agent.
- Notice: The Employment-Related Practices Exclusion CG 21 47 is added to this policy to clarify there is no coverage for liability arising out of employment-related practices. Please read this endorsement carefully.

Servicing Office Eastern Washington  
and Issue Date 03/28/16

Authorized Representative

To report a claim, call your Agent or 1-800-362-0000

DS 70 21 01 08



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## Common Policy Declarations

### Named Insured

### Agent

VALLEY WEST ELECTRIC LLC

(208) 466-4800  
JIM WATERS INSURANCE LLC

## POLICY FORMS AND ENDORSEMENTS

This section lists the Forms and Endorsements for your policy. Refer to these documents as needed for detailed information concerning your coverage.

### FORM NUMBER

### TITLE

CG 00 01 04 13	Commercial General Liability Coverage Form - Occurrence
CG 21 06 05 14	Exclusion - Access Or Disclosure Of Confidential Or Personal Information And Data-Related Liability - With Limited Bodily Injury Exception
CG 21 47 12 07	Employment-Related Practices Exclusion
CG 21 67 12 04	Fungi or Bacteria Exclusion
CG 21 70 01 15	Cap on Losses from Certified Acts of Terrorism
CG 21 76 01 15	Exclusion of Punitive Damages Related to a Certified Act of Terrorism
CG 21 86 12 04	Exclusion - Exterior Insulation and Finish Systems
CG 21 96 03 05	Silica or Silica-Related Dust Exclusion
CG 22 79 04 13	Exclusion - Contractors - Professional Liability
CG 24 26 04 13	Amendment of Insured Contract Definition
CG 84 94 12 08	Exclusion - Consolidated Insurance Programs Wrap-Up
CG 84 99 08 09	Non-Cumulation Liability Limits Same Occurrence
CG 88 10 04 13	Commercial General Liability Extension
CG 88 77 12 08	Medical Expense At Your Request Endorsement
CG 88 86 12 08	Exclusion - Asbestos Liability
IL 00 17 11 98	Common Policy Conditions
IL 00 21 09 08	Nuclear Energy Liability Exclusion Endorsement (Broad Form)
IL 02 04 09 08	Idaho Changes - Cancellation and Nonrenewal

In witness whereof, we have caused this policy to be signed by our authorized officers.

Dexter Legg  
Secretary

Paul Condryn  
President

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**Commercial General Liability  
Declarations**

Basis: Occurrence

**Named Insured**

**Agent**

VALLEY WEST ELECTRIC LLC

(208) 466-4800  
JIM WATERS INSURANCE LLC

**SUMMARY OF LIMITS AND CHARGES**

**Commercial  
General  
Liability  
Limits of  
Insurance**

**DESCRIPTION**

**LIMIT**

Each Occurrence Limit	1,000,000
Damage To Premises Rented To You Limit (Any One Premises)	100,000
Medical Expense Limit (Any One Person)	15,000
Personal and Advertising Injury Limit	1,000,000
General Aggregate Limit (Other than Products - Completed Operations)	2,000,000
Products - Completed Operations Aggregate Limit	2,000,000

**Explanation of  
Charges**

**DESCRIPTION**

**PREMIUM**

General Liability Schedule Totals	391.00
Policy Writing Minimum Premium Adjustment	107.00
Certified Acts of Terrorism Coverage	2.00

**Total Advance Charges:**

**\$500.00**

*Note: This is not a bill*

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DS 70 22 01 08



Coverage Is Provided In:  
Ohio Security Insurance Company

Commercial General Liability  
Declarations Schedule

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**Named Insured**

**Agent**

VALLEY WEST ELECTRIC LLC

(208) 466-4800  
JIM WATERS INSURANCE LLC

**SUMMARY OF CLASSIFICATIONS - BY LOCATION**

0001 5112 Briarcrest Dr, Nampa, ID 83686-8953

Insured: VALLEY WEST ELECTRIC LLC

**CLASSIFICATION - 92478**

Electrical Work - Within Building

COVERAGE DESCRIPTION	PREMIUM BASED ON - Individual Payroll	RATED / PER 1,000	PREMIUM
Premise/Operations Minimum Premium Adjustment	25,000 Dollars Of Payroll	5.776	\$144.00 \$1.00
<i>Total:</i>			<i>\$145.00</i>
Products/Completed Operations Minimum Premium Adjustment		5.316	\$133.00 \$113.00
<i>Total:</i>			<i>\$246.00</i>

**CLASSIFICATION - 92478**

Electrical Work - Within Building

COVERAGE DESCRIPTION	PREMIUM BASED ON - Employees Payroll	RATED / PER 1,000	PREMIUM
Premise/Operations	Dollars Of Payroll - if any	5.776	
<i>Total:</i>			
Products/Completed Operations		5.316	
<i>Total:</i>			

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**Commercial General Liability**  
**Declarations Schedule**

**Named Insured**

**Agent**

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**SUMMARY OF CLASSIFICATIONS - BY LOCATION - continued**

**CLASSIFICATION - 91581**

Contractors - Subcontracted Work - In Connection With  
Construction, Reconstruction, Erection or Repair -  
Not Buildings

COVERAGE DESCRIPTION	PREMIUM BASED ON -	RATED / PER 1,000	PREMIUM
Premise/Operations	Dollars Of Total Cost - if any	6.281	

**Total:**

Products/Completed Operations		5.332	
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**Total:**

**CLASSIFICATION - 91585**

Contractors - Subcontracted Work - In Connection With  
Construction, Reconstruction, Repair or Erection Of  
Buildings NOC

COVERAGE DESCRIPTION	PREMIUM BASED ON -	RATED / PER 1,000	PREMIUM
Premise/Operations	Dollars Of Total Cost - if any	3.930	

**Total:**

Products/Completed Operations		2.485	
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**Total:**

**Commercial General Liability Schedule Total**

**\$391.00**

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DS 70 23 01 08